FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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 OMB APPROVAL

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SEC USE ONLY					
Prefix		Serial			
DA	TE RECEIV	ED			

Name of Offering (check if this is an amend Common Stock Offering	lment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Type of Filing: New Filing Ame.	Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issu	ner	
Name of Issuer (check if this is an amend	lment and name has changed, and indicate change.)	
Real Value Distribution, Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2625 Colby, Suite 3303, Everett, WA 98033		206-228-1454
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2625 Colby, Suite 3303, Everett, WA 98033		206-228-1454
Brief Description of Business		PROCESSE
Boat Dealer	<u> As</u>	RECEIVE 3 AUG 18 2004
Type of Business Organization		
corporation	limited partnership, already formed	Other (please specify): THOMSON FINANCIAL
business trust	limited partnership, to be formed	PHVANCIAL
Actual or Estimated Date of Incorporation or Org	Month Year ganization: 1 0 0 3	Actual Destimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service Abbreviation for CN for Canada; FN for other foreign jurisdiction)	or State: W A

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC IDE	NTIFICATION DATA		
2. Enter the information rec	quested for the fol	llowing:			
Each promoter of the transfer of the tran	ne issuer, if the is	suer has been organized wi	ithin the past five years;		
 Each beneficial ov securities of the iss 	-	power to vote or dispos	se, or direct the vote or	disposition of, 10	% or more of a class of equity
•	•	of corporate issuers and of of partnership issuers.	corporate general and mana	aging partners of pa	urtnership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Gracey, Cory	if individual)				
Business or Residence Addr 2625 Colby, Suite 3303, E			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Sulham, Joe					
Business or Residence Addr 2625 Colby, Suite 3303, E			de)	_	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Blank, Lyle E.	if individual)				
Business or Residence Addr 2625 Colby, Suite 3303, E			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ress (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Adda	ess (Number and	Street, City, State, Zip Co	de)		•
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·	······································	· · · · · · · · · · · · · · · · · · ·	
Business or Residence Add	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

				В. І	NFORMAT	TION ABO	UT OFFER	ING				
											Yes	No
1. Has the	e issuer sold	, or does the	e issuer inter	nd to sell, to	non-accred	ited investor	rs in this off	ering?				\boxtimes
		Ans	wer also in A	Appendix, C	Column 2, if	filing under	ULOE.					
2. What i	s the minim	um investm	ent that will	be accepted	from any in	dividual?					\$ 25	,000.00
											Yes	No
3. Does the	he offering p	ermit joint	ownership o	f a single u	nit?			***************************************			🛛	
similar associa dealer.	remuneration	on for solici or agent of a in five (5) pe	tation of pur broker or d	chasers in c ealer registe	connection wered with the	vith sales of SEC and/o	securities in r with a state	the offering e or states, li	If a perso st the name	commission c in to be listed of the broken th the inform	is an r or	
Full Name	(Last name	first, if indi	vidual)									
Business o	or Residence	Address (N	umber and S	Street, City,	State, Zip C	Code)		·				
Name of A	associated B	roker or De	aler	10 A.W.		·			***************************************			
States in V	Vhich Persor	n Listed Has	Solicited o	r Intends to	Solicit Purc	hasers						
(Check "A	.ll States" or	check indiv	idual States)		*****					∏Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL] [MT]	[IN]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN]	[MS]	[MO] [PA]
[RI]	[NE] [SC]	[SD]	[TN]	[TX]	[UT]	[NY] [VT]	[VA]	[WA]	[WV]	[OK] [WI]	[OR] [WY]	[PR]
Business o	or Residence	Address (N	Jumber and S	Street, City,	State, Zip C	Code)						
Name of A	Associated B	roker or De	aler									
					Solicit Purc	hasers						
(Check "A [AL]	ll States" or [AK]	check indiv	vidual States [AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	Al [HI]	l States [ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] Full Name	[SC] (Last name	[SD]	[TN] vidual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Business o	or Residence	Address (N	lumber and	Street, City,	State, Zip C	Code)						
Name of A	Associated B	roker or De	aler	-								
States in V	Which Person	n Listed Ha	s Solicited o	r Intends to	Solicit Purc	chasers			**			
(Check "A	all States" or	check indi	vidual States	s)								1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	Charles and included by sever and the series		(Use blan	k sheet, or	copy and use	additional	copies of thi	is sheet, as n	ecessary.)			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.						
	Type of Security	Aggregate Offering Price			Amount Already Sold		
	Debt	\$_			\$		
	Equity	_\$_	150,000.00		\$	50,000.00	
	Common Preferred						
	Convertible Securities (including warrants)	\$		-	\$		
	Partnership Interests				\$		
	Other (Specify)				\$		
	Total		150,000.00		\$	50,000.00	
	Answer also in Appendix, Column 3, if filing under ULOE.						
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				A	ggregate	
			Number Investors		Dol	lar Amount Purchases	
	Accredited Investors		1		\$	50,000.00	
	Non-accredited Investors		0		\$		
	Total (for filings under Rule 504 only)				\$		
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.						
			Type of		Dol	lar Amount	
	Type of offering Rule 505		Security		Φ.	Sold	
					\$		
	Regulation A				\$		
	Rule 504				\$		
	rotai		<u> </u>		<u> </u>		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.						
	Transfer Agent's Fees	• • • • • • • • • • • • • • • • • • • •]	\$		
	Printing and Engraving Costs		[]	\$		
	Legal Fees	•••••		₫	\$	7,500.00	
	Accounting Fees	• • • • • • • • • • • • • • • • • • •]	\$		
	Engineering Fees		Г	_	\$		
	Sales Commissions (specify finders' fees separately)			- -	\$		
	Other Expenses (identify)		_	- -	\$		
	Total		_	<u> </u>	\$	7,500.00	
			_	_			

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	Question 1 and total expenses furnished in re- difference is the "adjusted gross proceeds to the is:				_	142,500.00
5.	Indicate below the amount of the adjusted gross prused for each of the purposes shown. If the amoun estimate and check the box to the left of the estimate and the adjusted gross proceeds to the issuer se above.	int for any purpose is not known, nate. The total of the payments l	forni: isted	ch an must		
				Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, tental or leasing and installation o	f machinery and equipment		\$		\$
	Construction or leasing of plant buildings ar	nd facilities		\$		\$
	Acquisition of other businesses (including the this offering that may be used in exchange for another issuer pursuant to a merger)	or the assets or securities of		<u>\$</u>		<u>\$</u>
	Repayment of indebtedness		\boxtimes	\$ 50,000.00		\$
	Working capital	**************************************		\$	\boxtimes	\$ 92,500.00
	Other (specify):					
				•		e
	Column Totals		_		凶	\$ 92,500.00
	Total Payments Listed (column totals added		ч			12,500,00
	Total 1 ay menas misted (continui totals auticu,	<i>,</i>		₽ ₹		72,300.00
		to replayed the	, , ,			A. 1949.2513
sign	issuer has duly caused this notice to be signed by ature constitutes an undertaking by the issuer to furmation furnished by the issuer to any non-accredite	rnish to the U.S. Securities and I	xcha	nge Commission, u		
Issu	er (Print or Type)	Signature				Date
RE	AL VALUE DISTRIBUTION, INC.	toe An	L	an		17/23/11
Nai	ne of Signer (Print or Type)	Title of Signer (Print or Type)			1 (/ - 2 / 0 7
Too	Sutham	Vice President				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE							
Is any party described in 17 CFR 230.262 presen of such rule?	tly subject to any of the disqualification provisions	Yes No						
:	See Appendix, Column-5, for state response.							
2. The undersigned issuer hereby undertakes to fu (17 CFR 239 500) at such times as required by st	arnish to any state administrator of any state in which ate law.	n this notice is filed, a notice on Form D						
3. The undersigned issuer hereby undertakes to for offerees.	urnish to the state administrators, upon written reques	st, information furnished by the issuer to						
	er-is familiar with the conditions that must be satisfi h this notice is filed and understands that the issuer clai ave been satisfied.							
The issuer has read this notification and knows the co- authorized person.	ntents to be true and has duly caused this notice to be si	gned on its behalf by the undersigned duly						
Issuer (Print or Type)	Signature	Date						
REAL VALUE DISTRIBUTION, INC.								
Name of Signer (Print or Type)	Title of Signer (Print or Type)							
Joe Sulham	Vice President							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.